

MATERIAL ORDER FOR THE UNIFORM DWELLING CODE (UDC)

Personal information you provide may be used for secondary purposes,
[Privacy law, s. 15.04 (1)(m)].
See Instructions Below

Customer Service Section
Safety & Buildings Division
P.O. Box 2509
Madison, WI 53701-2509
Telephone: (608)266-2780

Print or type - this is your mailing label

| | | | | |
|-----------------|-------|-----|---------------------------|-----------------------------------|
| Name, Title | | | Town, Village, or City of | |
| Mailing Address | | | County of | Municipality Number/State Agency# |
| City | State | Zip | Chief Inspector Name | |
| | | | Telephone () | |

Materials to be used by the following municipality, if applicable:

| FORM NUMBER | MATERIALS REQUIRED | NUMBER IN UNIT | COST OF UNIT | NUMBER UNITS ORDERED | COST |
|----------------|--|----------------------|--------------------|----------------------------|------|
| N/A | Building Permit Seal Required for all new dwellings. Fee includes seal plus one each of the following forms. If you do not desire any of these forms with your seals, cross them out here: Building Permit Application, Building Permit Card, Non-Compliance Report and Energy Worksheet. | 1 | \$25 | X | = |
| SBD-5823 | Wisconsin Uniform Building Permit Application | 25 | \$6 | X | = |
| SBD-5824 | Wisconsin Uniform Building Permit Card | 25 | \$6 | X | = |
| SBD-6025 | Inspection, Noncompliance & Final Report | 25 | \$6 | X | = |
| SBD-5518 | Energy Worksheet | 25 | \$6 | X | = |
| SBD-6072 | Permit to Start Construction (Optional Footing & Fdtn Only Approval) | 25 | \$6 | X | = |
| SBD-9890 | Variance Request Application Packet | 1 | NC | | = NC |
| SBD-10266 | Notice of Violation Card (Stop Work Notice) | 25 | \$12 | X | = |
| SBD-7955 | UDC Informational Brochure for Homeowners | 25 | NC | | NC |
| SBD-10115 | Commercial Building Code Informational Brochure | 25 | NC | | NC |
| | | | | | |

NC - No Charge N/A - Not Applicable

**TOTAL
COST \$** _____
**(Class Code 7655)
(PAID REC.#)**

Instructions: Instructions: Please **print** or **type** when completing this form. Keep a copy of completed form. This form is preaddressed and may be returned using a left window envelope. To do so, please fold form on dashed lines so that the address listed below is positioned accordingly. Make checks payable to Safety & Buildings Division. A completed form will be returned to you as your confirmation of payment.

SEND TO:

Customer Service Section
Safety & Buildings Division
P.O. Box 2509
Madison, WI 53701-2509

| OFFICE USE ONLY FOR ASSIGNMENT OF SEAL NUMBERS | | |
|--|-----------------------------------|-------------------------------|
| Starting Permit Seal # | Through & Including Permit Seal # | Number of Permit Seals Issued |
| | | |
| | | |
| Total Seals Shipped | | |
| Date Shipped | Initials | |
| | | |